

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____		2 Serial/Patent # <u>1520-1</u>	
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3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
7 TOTAL AMOUNT OF REFUND			\$

10 REASON:	8 TO BE REFUNDED BY:						
Overpayment	Treasury Check						
Duplicate Payment	Credit Deposit A/C #:						
No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; width: 150px; height: 20px; vertical-align: middle;"> <tr><td></td><td></td><td>--</td><td></td><td></td><td></td></tr> </table>			--			
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11 REFUND REQUESTED BY:	TITLE:
TYPED/PRINTED NAME:	PHONE: <u>86/29/2005</u> <u>PKIMWELL</u>
SIGNATURE: _____	DATE: <u>06/29/2005</u>
OFFICE:	181171 10520711

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____	DATE: _____
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: